

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALI TYPE	LEN	ITITY	OR	OTHER SMALL	
TOTAL CLAIMS							RAT	Е	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			26 minus 20=		• 6		X\$ 9	9=		OR	X\$18=	108
INDEPENDENT CLAIMS			7 minus 3 =		* 4		X40	=		OR	X80=	320/
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135	5=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTA			OR	TOTAL.	1138
	CLAIMS AS AMENDED - PART II								 		OTHER	THAN
_		(Column 1)		(Colu		(Column 3)	SMA	LLE	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	#	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=	
	Independent	*	Minus	***	T OL A114	=	X40	=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	FNDEN	CLAIM		+135)=		OR	+270=	
								TAL			TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT. I	FEE			ADDIT. FEE	
AMENDMENT B	Si di	CLAIMS REMAINING AFTER AMENDMENT	补数	HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .	X\$ 9	=		OR	X\$18=	
	Independent	TOTATION OF M	Minus	***	T CL AIM	-	X40	=		OR	X80=	
	I MOTTREOE	NATION OF IM	OLIN CE DEI	LIVELIV	CEANN		+135	5 =		OR	+270=	
							TO ADDIT. F	TAL EE		OR	TOTAL ADDIT. FEE	
_		(Column 1)	_		mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X40:	_		ΩD	X80=	,
الــُــ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			\dashv		OR		
	If the entry in colu	ımn 1 is less than t	he entry in colu	ımn 2. writ	e "0" in co	lumn 3.	+135			OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											